

**State of New Jersey**  
**Department of the Treasury – Division of Pensions and Benefits**  
**PO Box 295, Trenton, NJ 08625-0295**

**PUBLIC EMPLOYEES' RETIREMENT SYSTEM**  
**PROSECUTORS PART**

**CHANGE OF POSITION FORM**

**Completion of this form is required for all members transferring to or from a position that is eligible for the Prosecutors Part of the Public Employees' Retirement System.**

**As of** \_\_\_\_\_,  
Effective Date

\_\_\_\_\_,  
Last Name First Name MI

\_\_\_\_\_,  
PERS Membership Number Social Security Number

**had a position change from**

\_\_\_\_\_ **to** \_\_\_\_\_.  
Previous Position Title New Position Title

\_\_\_\_\_  
Signature of Certifying Officer

\_\_\_\_\_  
Printed Name of Certifying Officer

\_\_\_\_\_  
Telephone Number Date

## **ELIGIBLE STATE PROSECUTOR TITLES**

**The following titles are eligible for PERS Prosecutors Part membership if they are within the Department of Law and Public Safety and assigned to the Division of Criminal Justice:**

**Director**

**Assistant Director**

**Deputy Director**

**Assistant Attorney General**

**Deputy Attorney General**

**Criminal Investigator** (if ineligible for membership in the Police and Firemen's Retirement System)